



WEALTH PLANNING FOR THE MODERN PHYSICIAN

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FROM BURNOUT TO BREAKTHROUGH: REINVENTION STRATEGIES FOR PHYSICIANS WITH TODD JASON

David Mandell:

Folks, thanks for tuning in. I'm Dave Mandell, host of the podcast. For those of you looking at us on YouTube, which I know there aren't that many of you looking at our smiling faces, most of you are listening on the podcast platforms, thank you for joining us. We have a great guest and an old friend as a guest, and I've had a couple of those over the years. And let me tell you about Todd Jason.

So first of all, Todd and I worked together 25 plus years ago in a prior venture. We won't really talk about that much, but it was working with and helping physicians. So, it's kind of funny that's come full circle we're talking today. I'll give you his brief bio link to his LinkedIn and his podcast, which we'll talk about and all that kind of stuff in the show notes. So, if you want to get ahold of him, easy way to do it.

So, for more than 20 years, Todd has specialized in helping people go through challenging transitions to find new success and fulfillment on the other side. For the last five years, he's been hyper focused on helping midlife professionals uncover what's next in light of burnout. We'll talk about that. Layoffs, disruption or general uncertainty about the future. He has his own Reinvention Podcast. Again, we'll link and talk about that. It's been featured in New York Times, Fast Company, Success Magazine.

So, with that, Todd, welcome.

Todd Jason:

David, my brother, happy to be here. Excited for this conversation.

David Mandell:

Yep. It's funny. We're having a talk and it's being recorded and other people will be listening in, but we won't talk about our sports teams. We won't talk about our personal-

Todd Jason:

We can, but fine. It's fine.

David Mandell:

... we'll just stick to the topic at hand.

So obviously, now and for a time period here, you've been helping professionals with reinvention. We're going to get into that. But even before that, you and I have been talking, and I know you've been working with Kaiser Permanente out of the Bay Area running workshops for their physicians on burnout and leadership. So, let's talk about that because obviously that's a true and relevant to this audience. How'd that come about?

Todd Jason:

Yeah, it's interesting because you and I did do work way back when on physicians. And years later, I got in touch with another business partner, somebody who teaches communications at Stanford Business School. And it just so happens that she had a contract with Kaiser Permanente in San Francisco and brought me in to help the physicians deal with burnout, to deal with all the kind of mental and emotional stress that comes with the job.

And I have spent two years working with a lot of physicians. And so, we run workshops in that organization, online workshops, like grand rounds meetings. They give us the microphone for 30 minutes once a month at times. I've gone into Kaiser and we've brought speakers there. We had a Japanese samurai master come in.

David Mandell:

I remember you're telling me something about that. Let's talk about that for a second. It's kind of cool.

Todd Jason:

All right. Yeah. So, my former business partner now, but she was in touch with this Japanese samurai master who's literally one of those people that's doing things that don't make any sense. And it's like, he's the real deal. It's like watching the Matrix movies or something. And I've gotten to train with him here in LA where I live now. And we started to bring them to places like Kaiser. In fact, we also brought him to the Product Leader Summit in San Francisco. So, there's this annual meeting that has all the product leaders for all the tech companies. And we did a presentation there an hour and we had him, Rishi, come and do 30 minutes and it was the highest rated breakout/workshop they've ever had. I mean, people were blown away.

Because I think when we're talking about burnout, we're all human at the end of the day. And there are things that we can do to improve ourselves physically, mentally, and emotionally. And when you're around someone that has spent his entire life in crazy amount of training, physical training... He's a black belt in seven different disciplines and like a fourth degree and above, he's very, very advanced and he's young as well, you really start to see, "Wow, there's other ways that I can look at my life. There's other ways that I can look at my physicality. There's other ways that I can look at my mental training." Because a lot of us get stuck in this trajectory, like the world that we're in and how we're living and our jobs. And so, what we're just trying to do is to shake it up and have people see different ways of living and breathing so that way they can integrate some of that spaciousness into their really busy lives. It's not easy to do, but that's kind of what our approach has been.

David Mandell:

And it's funny because the Kaiser in San Francisco, I know my brother did a year at Kaiser. He left New York, or maybe it was two years, and I think he

worked at the one right downtown off the freeway in the center of the city there.

Todd Jason:

Yeah.

David Mandell:

So, you work with a lot of docs in that context. And Kaiser's a very interesting institution in a lot of ways. There's a lot of great, I think from the docs I've heard, medicine, a lot of good coordination between the specialties and information sharing and some things that they've kind of pioneered. But what did you see as common issues? Did you see a lot of burnout? What were people coming up to you or putting in the chat or reaching out about, "This is what I'm going through"?

Todd Jason:

And I think Kaiser is unique in the sense that the way that that organization formed was like physicians forming an organization for physicians as opposed to administrators and businesspeople forming a hospital or healthcare program or institution that they don't really understand the nuances of what it's like to be a doctor. But on the other side of that, while that sounds really amazing, all these doctors now have other responsibilities in Kaiser where they have administrative roles. They're running the business to an extent.

So, it's a little bit of an interesting thing that does add an extra layer of potential burnout and mental fatigue. I mean, at the end of the day, what I found in literally working with hundreds of doctors is a general sense of overwhelm. There's just too much going on. There's too many different things to handle. I mean, most physicians go into it because they're really fascinated by the body and they really want to help people. I mean, this is what doctors do. It's why I love working with doctors. I think you do too. It's like everyone that's listening to this, God bless you. You're literally here to help people in a variety of different ways. And so, someone like you or me that comes in with

financial advice or maybe some coaching advice, and it's like anything that we can do to help.

And so, people would come at us with a lot of questions. I mean, a lot of, "What do we do? We're overwhelmed." And I'll say from the get-go, David, that there isn't a magic pill. There isn't this one thing that you can do here. Burnout is now a medical term for a reason. This is a very real phenomenon that just doesn't only apply to doctors, but to a lot of professions and a lot of people in corporate that we're working with are experiencing this as well. And so, we just want to start there with like, "Hey, this is a real thing. And no one did anything wrong. You haven't done anything wrong. You are not alone." A lot of this, David, is people don't have others to talk about this with. So even us broaching the conversation in community with a lot of people on the line, it was so healing for them to feel like, "Oh yeah, I'm dealing with this too. I'm dealing with this overwhelm. I'm dealing with what feels like a bunch of situations that can't logistically get resolved."

So, we started there just like with, "Okay, you're in a tough situation. As a physician, you're in a tough situation." The way that the profession has evolved and what you're being called to do has so many different variables that it doesn't feel like one person can do that. Plus, you weren't given the training in a lot of the different areas, like what you do, helping them financial planning, doctors, it's like they weren't taught a lot of this stuff. They didn't get an MBA. They got a MD and now they're having to run a business and they're entrepreneurs in a lot of sense and they're dealing with billing and coding issues and they're dealing with managing teams. That's a lot of it, dealing with the management of teams and people and the interpersonal things that go on.

There are so many issues that were brought to the table. And our approach and my approach continues to be, "Look, yeah, this is very real. Let's talk about it from a very sober perspective. And then from that point, let's start to give some more practical recommendation of things that you can start to play with." You need to have an open mind and start playing with some actual techniques when it comes to burnout or overwhelm, so that way you at least

have a shot to create some space into the matrix of overwhelm because that's often what's hard to do. But it's got to start with intentionality.

David Mandell:

Yeah. And I've seen that. I mean, obviously we're doing this on this podcast, but I've seen it even. And you know because we go back 25 years doing this, but speaking at medical conferences, there never used to be talks on burnout. Or not even just talks, but also a recognition from the society is that we got to do something about this, because we're going to lose docs from the profession. And in certain specialties and in certain areas of the country, this is becoming a real macro issue even beyond docs what we're talking about here. But do we have enough folks helping who are qualified to help our citizens across the country because this becomes...

And we've had a couple of older docs see it and say, "Listen, I've seen this grow and it's becoming a bit of a," you don't want to say epidemic, but that it's becoming a real problem. And so, we've got to address it. And that's why one of the reasons we're here.

So, let's get into practical, like on a day-to-day. What are some of the tools or ideas you would say if someone's dealing with burnout, whether it was in Kaiser or elsewhere in your community that you're getting into, some practical tips?

Todd Jason:

Yeah, definitely. I think we want to get into that. And again, like I said before, David, there's no magic pill. I mean, I don't know if you watch or you're watching that show, The Pitt right now, which is doing that... It's an amazing show.

David Mandell:

No, I haven't, but I know that's been very popular. And it's taken place in an ER, I think, right?

Todd Jason:

Oh my God. I know a lot of doctors. I talk, I'm like, "Is this real?" Yeah, that's pretty accurate. I mean, what's funny about the show, David, is that as a non-physician, I don't understand 70% of the dialogue. I mean, it is literally, but-

David Mandell:

Yeah, they're getting into the music.

Todd Jason:

... you're so into it. You're like, "Oh my God." You feel like you know the characters. It's very, very well done.

And also, I just think from a societal standpoint, watch that show so you can actually understand what these physicians are doing. I mean, they're the ones saving lives. They're the ones that are doing stuff in the trenches. And meanwhile, they're probably the most burnt-out profession dealing with exhaustion overall.

David Mandell:

That doesn't make any sense, right?

Todd Jason:

Doesn't make any sense. It makes no sense. So, what do you do? So, all right, what's the good stuff? What are you actually doing?

Look, the way that I've been coaching hundreds of physicians is to look at this very tactically. And when I say that it's like, look at two different parts of your life. One while you're working and what are you doing while you're at work? What can you do in the day-to-day to start to integrate some more spaciousness, some more things that can refuel you, given that we can't change your profession. You're just in a situation that's tough and there's a lot of empathy that goes with that. So, what are the things that we could do in that?

And then secondly, how can you really refuel yourself by creating very strong boundaries around time off and then when you're not working? So that's a very important thing to be able to really shut it down and shut it off when you're not there. And that takes some mental reprogramming. So, we can go into both of those areas because I have more specific recommendations. Just want to check in if that makes sense.

David Mandell:

Yeah, let's go. Let's go into during the day or while at work and then outside.

Todd Jason:

Yeah. I mean, I'll give you an example. So, my former partner, Lauren, who I said teaches at Stanford Business School, she's pretty awesome. On one of the first calls that we did, she did a 20-minute talk on the power of what's going to sound like a very esoteric practice, but I'm going to make a point on this, called earthing, which is literally when you go outside and you take off your shoes and socks and you put your feet on the ground and you just spend a couple of minutes actually just feeling your body, whether you're in the sun or it could be even raining. And she was recommending, we had I think around 200 doctors on this grand rounds call. She's like, "I want you all for the next week as much as you can, in your breaks, going outside and putting your feet on the ground and see what that does." And you could see the blank faces on the screen, man. I even see it on your face like, "Well, are you crazy?"

David Mandell:

I have a couple of things to respond to that but go ahead.

Todd Jason:

But it's like, "Really, that's going to help?" And she was doing it to kind of shocking all people of like, "No, we need to break this up." You need to start breaking up the patterns because we can't control the circumstance, but what we can control are the things that you're doing in between patients. We can't control the things that you're doing when you're not in an immediate situation, which actually is most of the time. You can't control your lunch

breaks, you can't control... And what you want to be doing is being much more conscious and intentional about how you are using those mini breaks to fuel yourself. So drinking water, yes, going outside, going for a walk. For some people, we found a lot-

David Mandell:

And getting on social media and get more stressed out and overwhelmed.

Todd Jason:

No, that's not what you want to do at all. We had some doctors; we did a whole practice where we would have them just journal for 10 minutes. Just write out what's going on, the stresses you have just on a document that has nothing to do with work. Or you could even do what we call self-talk, which is where you take your phone. It's almost like a personalized therapy session where you just talk out your stress. You get it out of your body. Literally just you're processing the information. Because what happens with burnout or anything that's related to this is that the overwhelm, the anxiety, it builds up, it builds up, it doesn't have any release points. And so, what you want to be doing is building in many ways that you can constantly release and then get back, release and get back.

So, this is one thing that you want to be doing, like hydrating, going outside as much as you can. And this is unreasonable for some doctors, I get it. We get it but just trying to integrate those things.

I know you have a response.

David Mandell:

Yeah. So, because my reaction you were seeing in my face was remembering my father who's been on the podcast, he passed away a couple of years ago, but before he did, he was on, 50-year career as a radiologist. And earlier on, I remember him telling me that he suffered a bit from seasonal depression. Radiologists, all in the basement, no windows where he worked, and New England winters, not sunny every day. So, he would make a point to try to, sometime during the day, lunch, whatever it was, get out and walk around.

Even if it was cold, middle of winter. Because just being outside, and again, there's plenty of sunny days in the winter also, helped. So, he was kind of getting wise to this early on.

And I'm sure, listen, there's plenty of data and sayings that go by 5,000 years, "Go for a walk. It solves 90% of human problems."

Todd Jason:

Tons of data on that. I mean, this is all research backed. I mean, that's what we would do. We wouldn't just say these things, by the way. We would literally come in with the research. Our famous line that we did at every meeting was research shows, because it does show that these things that we're talking about do, over time if you habituate them, relieve a tremendous amount of anxiety and stress. And it sounds counterintuitive. It sounds like I don't have the time. It sounds like, "How am I going to remember to integrate that?" This is where you got to fight. We had doctors setting reminders on their phone to go outside. Use the tools that you have to be able to do these things, to get out. Because we can't solve the problem, but we can start to integrate some solutions that over time will work.

David Mandell:

Yeah. I mean, terrible way to say this, but this is the only expression I can think of, death by a thousand cuts. You got to start weakening those cuts. And if you can be outside, if you can do these things in day-to-day, it just brings the level down.

I do want to get to reinvention, but I do want to come back to the second piece that you mentioned, which is about time off. What should docs be thinking about when they're not at work or on vacation or just home every night after work? What are some of the things you're stressing that you should be thinking?

Todd Jason:

Yeah, I want to talk about this. Actually, I want to mention one other kind of practical practice that I have to say because we've helped a lot of people with

this. Because with physicians, there's a lot of different responsibilities. It's not just patient care. There's a lot of different things that are going on as we talked about in the beginning. And so, one of the things that we help doctors do and see is, what are the areas within your job that feels overwhelming that you could look for help or look for ways to systematize some of the areas that cause you the most stress?

This is very, very important. And so, it feels unreasonable, but I mean, there are times where we had doctors requesting funds for virtual assistance that could help do certain things that they were able to do. Obviously, we can't get them into patient records and all that, but what can you do to systematize your job better? And so, a lot of doctors don't ask for help or think about it this way, but this is what is actually needed. And a lot of people, "Oh, you're blaming us because we're..." No, I'm not blaming anybody at all. I'm just saying, maybe it's a little bit of a mindset shift and start thinking about it more like a CEO of a tech company that's constantly looking to understand what the situation is and then systematize it and farm it out.

Now, this is not fully reasonable for doctors, but it's somewhat reasonable. And we saw a lot of success with this. Even what you're doing. Asset protection, financial planning, this should be an outsource thing. Anything that has to do with business, anything has to do with running the business, getting coaches and support that can help you with the interpersonal relationships that cause a lot of stress and anxiety, so we found a lot of the stuff is interpersonal. How can you find people to support you in those situations? This releases a ton of stress. So, I just wanted to be able to share that.

David Mandell:

Yeah, that's a great point I'm glad you brought up, because two things. One, it totally jives with a big picture or macro, sort of theme that's come out of this, we're a hundred episodes in, six seasons, which is the importance of delegation and highest and best use.

Todd Jason:

Right.

David Mandell:

Which is, if you're going to go into business or whatever, you want to be doing the things that you're praying for, which are rewarding, et cetera, and find good people and delegate them and let them do their job. It's a key... If you're going to learn anything from entrepreneurship, from business, that's a lesson because you can only do so many things.

The second thing to tie it in even closer is, if this is of interest to people and you missed a couple of episodes before, I already recorded it, but it hasn't been out yet with Dr. Lowentritt out of New Orleans. He talks about using AI. That's the whole episode, and one of the examples is a scribe. So, he brings his phone in. So now he's talking about, he doesn't have to be... Two things. Two things that relate to burnout. One is instead of, and I went to my PCP recently and this is how it was. Looking at the screen and typing the whole time and listening to my responses. No human interaction there, looking at the screen, not looking at the patient.

Now he doesn't have to do that so he can actually do what he likes to do, what he got into medicine to surely is listen to the patient, give them advice, et cetera. The scribe is recording it. That's the first thing. And then the second thing is, he said his mental, his cognitive load is taken down, which lowers stress because he doesn't have to think about, "Oh, did I write that down? Did I write that down?" It's doing it for him. He can focus on the good things and then come out of the office and look at the notes later, et cetera. But that's just one micro level.

Todd Jason:

It's that one micro thing actually, because I didn't know we were going to get to it, but this AI thing that's happening right now, this is something that can really help physicians. And I highly recommend physicians to turn into it and start to really understand how Claude or Chat can be your personalized assistant. You should be recording everything. It's unbelievable.

So, we run a community called Reinvention, and we have a lot of tech people in that community, and they will show us what they do to organize their lives and their businesses. And it is so far and away how they're using AI to do it. It's almost like they've solved all the problems with the logistical stuff. And so, with what you're saying, I can't recommend this enough. This is a very good thing for physicians to turn into the tools, to use it as not only a scribe, but you can train it. It's an intelligence to then take that information and do a lot of different things with it that you need to do. It's not even just like the inpatient cognitive load piece; it's then the aftermath of what needs to happen.

David Mandell:

Yeah, of course.

Todd Jason:

And this is already on, and I think this is a huge boon for physicians that are overwhelmed with the amount of information and data that comes to them. It gives you more face time with the patients. It gives you back to what you really want to be doing, which is connecting with the people and understanding the problem. It's a great thing.

David Mandell:

I'll just give one more example. I want to move on to reinvention because there are docs here thinking about, "Do I go part-time? Do I do something entrepreneurial?" And I want to talk about that. But just the last thing from that conversation for people who didn't go listen to it. Lowentritt talks to me about one of the companies he's involved with, and one of the use cases that stayed with me is the AI goes into the charts or somehow into the data and then comes up with, "These are the patients, these 5 or 10 that need a phone call this week."

So, you don't have to be thinking of, as a doc, "Which one is like two weeks out of the OR," and like, "Oh, I should be calling them because we haven't heard from them back in the practice." Somebody who's got to be so stressed out about trying to keep that straight, you can get the computer. I know you're going to talk about your pod, but I want to get into the next-

Todd Jason:

I know, but if you're dealing with overwhelm, even what you just mentioned is the tip of the iceberg. This can solve so many problems. I mean, it's unbelievable. Turn into it, my friends. I know it's scary. It's a lot. It's this big thing, ambiguous. Everyone's talking about AI, AI, this is a tool that can help. Okay. So, I want to stop there because we can turn it off-

David Mandell:

I even told to my brother Ken, who people listen and watch, Todd, knows about this scribe thing. And I think I finally got him to start to move forward. So, if he can do it, anyone can do it.

All right. So, what about bigger picture? Not just helping docs, which is obviously crucially important. That's why we started with it, but there are some docs who are going to be saying, "I want to change a bit of how I even practice." Or maybe you and I, before the recording came on, talked about my dad and how he went from kind of a typical practice partner to the second half of his career was all more 1099 and locums. And he really had a real shift in his career that ended up being about 20 years. So, it was almost 20 to 30 and then another 20, which was really rewarding for many talks about it in our episode here.

So, if people in general, professionals in general, but also doctors in particular are starting to think about what else is out there, reinvention, tell me about what you're doing there and where things are going, because I know this is like an area that is exploding.

Todd Jason:

It is right now. And so let me just define what reinvention is for people, for the doctors listening. So, a career pivot, everyone knows what a pivot is. We're pivoting careers, we're doing this. The word reinvention is a little bit different. We're saying, "All right, I'm in a place right now in my career," and we work specifically with people that are kind of mid-career. So usually 40 and up, 40 to 60, let's say in that range who have built their trajectory in some sense and now they've come to a point where change is afoot to some extent. Either

burnout has gotten them and they're like, "No, I need to figure something else out." Or they have some other interests that are emerging or there's opportunities for fractional work or different things are starting to pop up.

And in my opinion, of tracking this for a long time and in our podcast, and we talk with a lot of VCs. We just had a conversation with Bill Gurley, a legendary VC from Benchmark, talking about the future of work. Like where's this all going with AI? Where's this all going? What's happening? Because we want to help people skate to where the puck is going, the famous Wayne Gretzky said that. So that way it's not just I'm trying to survive and tread water and keep pivoting my career, but how do I really think about this long-term and connect with where the future is going? So that's why we're doing our podcast, not just with coaching advice, but also with advice from really smart visionaries. And no one really knows, to be honest, but they have an idea.

So, reinvention is a mindset of, "Okay, things are changing, I'm changing. I need to start, number one, getting clearer about what my potential future options are. And I need to figure out how I can integrate this as a practice into my life in terms of exploring new options," even new revenue streams, new income streams, if that's on the table right now. Even just thinking about like "What would actually make me happy? Oh my God." A lot of mid-career professionals don't think that way, like, "Oh, what would actually make me happy?"

David Mandell:

They haven't in a long time.

Todd Jason:

It's like, "What are you talking about? I got to get kids in college and have a mortgage to pay. I don't really have an option to think about..." But you do. And so, reinvention is a really big thing right now. It's a phenomenon. I really do think it's like almost a zeitgeist moment that we're in right now with everything in the world, not just AI, but politically, economically. There's a lot of challenges in the world. And also, the level of burnout is like over the top, how many people just aren't happy in their careers.

So, our approach is, let's just be honest with it and just start to have honest conversations with yourself about like what could you do in the future. That's where it begins. It just begins with an assessment internally like, "Okay, what are my options? What could I do?" And for a lot of the physicians that we work with, we're not trying to get people out of medicine, of course. I mean, there are some doctors that do eventually leave. A lot of the folks that are physicians are looking at options within the changing landscape of the medical world and thinking like, "What can I do to make a contribution that may also fit the lifestyle that I want more than my previous career was?"

And there's nothing wrong with that. For us, my business partner and I, it's a lot about giving people permission to think about life as a blip in the matrix. Dave, we're here for a short period of time. You mentioned your dad passing and I was actually on the Zoom call for that ceremony and I saw how moved you are. I know you were so close with him, and he was like such a great guy. He was a reinventor. He was somebody that was like an entrepreneur, he was that kind of guy. And I think that's what we're going towards where in the future, in the next 10, 15, 20 years, the people that are really going to find that balance of being happy, being successful, having abundance are going to honor their lifestyles a little bit more and probably have a couple of different ways that they're working, a couple of different projects that they're involved with. It's what we call reinventors.

It could be fraction of work, consulting work, being involved with these types of projects, not just one thing that you're doing over and over again. And so, with that concept of reinvention, we have a very particular way and a framework where we help people start to uncover these ideas and these new ways of thinking. We have six tenets of reinvention basically that we can cover a little bit, but I do think that they're helpful because you want to start being more flexible. I mean, if you're too stringent right now in a rapidly changing world, you're headed for probably more problems than you are ready for. You can avoid that.

And so, we want people to be preemptive. What is it that you can do to really think about your career long term? What decisions do you need to make? And yes, when it comes to reinvention, let's think about what you really want to do, like what would make you happy, what life would make you happy, what work would make you really happy, and start to align your moneymaking with those things. And when we talked to Bill Gurley, the VC I mentioned, he was like, "Look, this is the opportunity of now." AI is actually a real freedom tool, at least right now, that's helping people start to explore some of these new things.

And so that's why we're passionate about this day because a lot of people have work up in the air right now or they're on a trajectory that hasn't made them truly happy and fulfilled. And a lot of people were never trained how to think about it this way, especially midlife professionals, people 40 and up, they haven't thought about it this way. So now we're kind of introducing this concept and then training them to think about their careers in a new way and let's see what wants to become of that. And so that's in general what reinventions about.

David Mandell:

So, in medicine, and you know this, you got two things. One I think is one that would make it very challenging and why there's sort of a pent-up need. And then I also think that at least what I've seen, and the docs listening and watching may have some different opinions on this depending on their specialty, et cetera, but that medicine is, out of necessity, changing to accommodate that. So, the first thing is most people become doctors. Some of the best, smartest kids in the school, nothing's changed. I don't think. Again, I could be wrong, but in terms of pre-med requirements, organic chemistry and all that, biology, I don't know that's changed since my father's father.

So, in medical training and all that, so it's like they come out of this with really no flexibility mentally. This is what you have to do. You do this pre-req, then this thing, then you apply for this, you get matched, you do this, you get matched, you do that. So, you come out and you're like, that instinct of being flexible and mentally open isn't there. So, they come out and go, "I'm not so

happy." Some people are, some people aren't, et cetera. But if you look at, even on this podcast, but certainly... I mean, I talked about my dad, but we had somebody just on locums for a couple of episodes, an expert on that, which allows people to take that license and that training and build their life around that, certain specialties. Again, my father, radiology, with telemedicine, that makes it so you could really be anywhere. And there are plenty of radiologists who are doing that. That's not the same if you're obviously got to put your hands on someone's surgery, et cetera.

So some of it is different by specialty, but I have seen, I think that the industry, if you want to call it that, or the profession, it's probably the better way to say it, is I think out of necessity, being more open to different ways of having the practice of medicine and having patients be served because of the need of docs who want to do it that way. And because there's just so many patients to deal with that you need extenders and all that kind of thing to be efficient and to delegate. But I can see this becoming even more and more important in the coming near future.

So, we're getting to sort of the time I want to wrap. For docs in that period, not the ones just coming out because they got to see what they like and figure it out. But in that period where they've been practicing in a while, 40 to 60, and then some docs who are probably, and we hear this and we've had this on the podcast too, docs who are going to retirement. Most docs cannot go from being so important, life and death, to the next day just playing golf every day. So, there's the whole reinvention of, "What do I do when I still have energy in my brain and I don't want to just do nothing?" There's that reinvention too.

So, for both the ones in practice who are thinking about, "Hey, I really want to build this around what makes me happy but do it within the context of how I can make money." But also, the ones transitioning to maybe part-time, et cetera. What are some of the things that they should be thinking about and what are some resources for them?

Todd Jason:

It's a really great question. I really appreciate you asking it. And the biggest thing for me that I try to get across to all my clients and everyone that I talk to,

and if you listen to our podcast or Reinvention, Chris and I, my business partner, who was like big corporate guy, like EVP of a big real estate company for 20 years, got totally burned out and then had to reinvent himself. Went to NYU to get executive coaching and all that. And now we have this podcast together. The biggest thing that I recommend people integrating into the lives is the question of, "What would make me happy?" Getting clarity about a future that would make you feel really good and excited about where you're at right now and where you can go.

And this is really difficult for a lot of people who are mid-career or even late career, as you mentioned. That's a very big group too, because we're not taught to think about it that way. We were never taught to think about it that way. But you can learn to think about it this way. For example, in our community, when people come into our community, we give them right off the bat, this two-day course called the Clarity course. And basically, in the course, I'm going to give away the goods right here. I'm going to tell you what we do. It's a practice. It's a master practice. And what we have them do, and I guide this, is I have them write, it's going to sound morbid, Dave, but I have them write their own eulogy. I have them write their own eulogy from the perspective of they've lived the next 20, 30, 40, 50 years, however old you are. They've lived the next time and it's been awesome, it's been idealistic.

I have them imagine, "Man, the rest of my life has really worked out well." And then somebody, a third party is reading about that life from that perspective. And the exercise what it does is, the exercise in a sense forces you to think about, "Well, what is that life? What are the adventures I have? What is the work? How am I giving back? What are the philanthropic contributions that I'm known for? What are the ways that I'm influencing and impact younger people? How am I using my money and my abundance or how am I building more wealth if that's what I want?" It gives you the ability to have an honest self-assessment about the things that are really important to you in a way that isn't... You don't have to show it to anybody per se. I mean, in our community, we do have people share because it's really valuable. Because sometimes we've had people, we've had doctors do this exercise and then they're like, "Oh my God, I'm pretty surprised by what came out here. What does that mean?"

Well, what that means is that you're probably not fully aligned with a life that you want to live. Again, I mean, especially doctors know this life is short. It's a blip in the matrix. I spent six months working in hospice. I've been around people that have six months or less to live. And I was young when I was there, but I couldn't help myself, Dave. And I would go around and I would ask people, "What lessons do you have for a young guy like me?" And it was always the same. "Don't sweat the small stuff, value your relationships," all the things that we know, but we got to make this practical right now. So, I love that practice of the eulogy because it does something to give you a moment of creativity and imagination just to imagine what the rest of your days could be like that are really useful.

And from there, what I've also found in years of coaching people is that it does something really interesting doing that practice. It creates something in your subconscious mind. Below the thinking, the prefrontal cortex part, it does something that starts to have you maybe even explore things that maybe you wouldn't have before. And that's a good thing. That's a good thing. We need to get out of the kind of preordained trajectories that we've been in that... They're not all bad. I don't want to make our current, it's not all bad, but what can we do to have it better? And that's why in reinvention, we have people get clarity, start with that.

And then the rest of it is around like, "All right, look, let's make a game plan. Your dad was a master at this. Let's start doing some smart experiments. Who can we reach out to? Who can we reach out to? Who can we learn from? What kind of people can we talk to that are doing things maybe a little bit differently?" There are a lot of doctors doing all kinds of things that are maybe not as linear as where some folks are. So, talk to those people at conferences, reach out to them. They want to be able to share what they're doing. And I got to say, you're right. The medical field has a level of archaic energy of the same thing for a hundred years, but it's changing and it's going to change more. With AI and everything, this is definitely going to change.

And so, our pitch is to be active, be open-minded. Come into this with the mindset of flexibility, start being creative with your endeavors, start experimenting, and let's see where this lands. I mean, my goal, David, in life is anyone that I talk to or touch, I just want them to be happier and more fulfilled in their life. That's all. What can I do in this conversation to have you feel happier and more fulfilled and maybe more aligned with what you want to do? And there's practices that you can do to do that. And so that's our goal. Our role in this life is to give folks these practices. And if you want to listen to our podcast, listeners, definitely check out Reinvention. It's pretty awesome.

David Mandell:

Yeah. Well, we're going to put the link in there.

Todd Jason:

Yeah, it's fun. And that's our stuff. That's our gist.

David Mandell:

So, it's so funny, Todd, and we'll wrap with this. But the eulogy or I've seen it as obituary exercise is something, it's sort of been on my to do list for a long time. And you know me, I've always been entrepreneurial. And what we're doing with Earned is right in what I want to be doing and our mission and all of that, and everything that we're doing is on point. But I'm always somebody trying to maximize and optimize. And that has been an exercise, and I'll talk with Sheila about it, that has sort of been on my to do list for a while. Because I do believe in that. I believe that that'll open up some ideas, open up some creativity, and also really remind myself and whoever's doing it of priority because you're not here forever. And it's like there's a balance between getting stuff done and doing the stuff we want to be doing, but I'm glad you started with that. I know there's a lot more to what you're doing than that.

And we're going to put all of Todd's info in the show notes so people can get ahold of him. I've been listening to this podcast. It's one of the ones I subscribe to, and I hope everybody else here will. Thanks, Todd, for me and I really appreciate it.

Todd Jason:

Yeah, man. By the way, just so you know, I'm happy to give you... The eulogy practice is so powerful and there's a way; there's a formula to do it really well. I'll give you and anyone listening, access to that first explanation of how to do it, because you want to maximize it. You don't do this that often. It's a really big thing to do to think about your own demise and think about what you want. It's kind of a deep thing. And so, there's a way, there's a formula for how to do that well, and I'm happy to give that to you in email.

David Mandell:

Send that to me, and I will do it and get back to you. And we'll put it in the show notes that there's a link to a place they can get it on your site. We'll do it. Awesome.

Todd Jason:

Thanks, David. Appreciate it.

David Mandell:

Bye. Great seeing you.

Todd Jason:

Yeah.

David Mandell:

And for everybody on, thank you for being on. If you're so inclined, give us five stars on your platform, say something nice about us. If you're a physician, has something interesting to say, either career-wise or something entrepreneurial or something philanthropic or something that you think your colleagues would be interested in hearing about, reach out. I always like to talk to you. And with that, in another two weeks, there'll be another episode, so thanks for tuning in.

Todd Jason:

Thanks, Dave.